

Texas Education Agency Standard Application System (SAS)

| 2017–2018 Perkins Reserve Grant | | |
|---------------------------------|--|--|
| Program authority: | Title I, Part A, Carl D. Perkins Career and Technical Education Act of 2006, Public Law 109-270, Section 112(a)(1) | FOR TEA USE ONLY Write NOGA ID here: |
| Grant Period: | November 13, 2017, to August 31, 2018 | |
| Application deadline: | 5:00 p.m. Central Time, September 26, 2017 | Place date stamp here. |
| Submittal information: | <p>One original and two copies of the application, printed on one side only and signed by a person authorized to bind the applicant to a contractual agreement, must be received no later than the aforementioned date and time at this address:</p> <p style="text-align: center;">Document Control Center, Grants Administration Division Texas Education Agency, 1701 North Congress Ave. Austin, TX 78701-1494</p> | <div style="border: 1px solid black; padding: 5px; display: inline-block;"> RECEIVED TEXAS EDUCATION AGENCY 2017 OCT 26 PM 1:24 DOCUMENT CONTROL CENTER GRANTS ADMINISTRATION </div> |
| Contact information: | Diane Salazar: diane.salazar@tea.texas.gov ; (512) 936-6060 | |

Schedule #1—General Information

| Part 1: Applicant Information | | | | |
|---|--|-----------|-------------------------------|----------|
| Organization name | County-District # | | Amendment # | |
| Frankston ISD | 001904 | | | |
| Vendor ID # | ESCRegion # | | | |
| | 7 | | | |
| Mailing address | | City | State | ZIP Code |
| P.O. Box 428 | | Frankston | TX | 75763 |
| Primary Contact | | | | |
| First name | M.I. | Last name | Title | |
| Ed | | Prater | Executive Director Operations | |
| Telephone # | Email address | | FAX # | |
| 903 876-5920 | edprater@frankstonisd.net | | 903 876-4558 | |
| Secondary Contact | | | | |
| First name | M.I. | Last name | Title | |
| Edgar | | Rodriguez | High School Principal | |
| Telephone # | Email address | | FAX # | |
| 903 876-3219 | edgarrodriguez@frankstonisd.net | | 903 876-4558 | |
| Part 2: Certification and Incorporation | | | | |

I hereby certify that the information contained in this application is, to the best of my knowledge, correct and that the organization named above has authorized me as its representative to obligate this organization in a legally binding contractual agreement. I further certify that any ensuing program and activity will be conducted in accordance with all applicable federal and state laws and regulations, application guidelines and instructions, the general provisions and assurances, debarment and suspension certification, lobbying certification requirements, special provisions and assurances, and the schedules attached as applicable. It is understood by the applicant that this application constitutes an offer and, if accepted by the Agency or renegotiated to acceptance, will form a binding agreement.

Authorized Official:

| | | | |
|--------------------------------|--|-----------|-------------------------------|
| First name | M.I. | Last name | Title |
| Ed | | Prater | Executive Director Operations |
| Telephone # | Email address | | FAX # |
| 903 876-5920 | edprater@frankstonisd.net | | 903 876-4558 |
| Signature (blue ink preferred) | | | Date signed |



October 23, 2017

Only the legally responsible party may sign this application.

Schedule #1—General Information

County-district number or vendor ID: 001904

Amendment # (for amendments only):

Part 3: Schedules Required for New or Amended Applications

An X in the "New" column indicates a required schedule that must be submitted as part of any new application. The applicant must mark the "New" checkbox for each additional schedule submitted to complete the application.

For amended applications, the applicant must mark the "Amended" checkbox for each schedule being submitted as part of the amendment.

| Schedule # | Schedule Name | Application Type | |
|------------|---|--|-------------------------------------|
| | | New | Amended |
| 1 | General Information | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2 | Required Attachments and Provisions and Assurances | <input checked="" type="checkbox"/> | N/A |
| 4 | Request for Amendment | N/A | <input checked="" type="checkbox"/> |
| 5 | Program Executive Summary | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6 | Program Budget Summary | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7 | Payroll Costs (6100) | See Important Note For Competitive Grants* | <input type="checkbox"/> |
| 8 | Professional and Contracted Services (6200) | | <input type="checkbox"/> |
| 9 | Supplies and Materials (6300) | | <input type="checkbox"/> |
| 10 | Other Operating Costs (6400) | | <input type="checkbox"/> |
| 11 | Capital Outlay (6600) | | <input type="checkbox"/> |
| 12 | Demographics and Participants to Be Served with Grant Funds | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 13 | Needs Assessment | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 14 | Management Plan | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 15 | Project Evaluation | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 17 | Responses to TEA Requirements | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 18 | Equitable Access and Participation | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

***IMPORTANT NOTE FOR COMPETITIVE GRANTS:** Schedules #7, #8, #9, #10 and #11 are required schedules if any dollar amount is entered for the corresponding class/object code on Schedule #6—Program Budget Summary. For example, if any dollar amount is budgeted for class/object code 6100 on Schedule #6—Program Budget Summary, then Schedule #7—Payroll Costs (6100) is required. If it is either blank or missing from the application, **the application will be disqualified.**

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Changes on this page have been confirmed with:

On this date:

Via telephone/fax/email (circle as appropriate)

By TEA staff person:

Schedule #2—Required Attachments and Provisions and Assurances

County-district number or vendor ID: 001904

Amendment # (for amendments only):

Part 1: Required Attachments

The following table lists the fiscal-related and program-related documents that are required to be submitted with the application (attached to the back of each copy, as an appendix).

| # | Applicant Type | Name of Required Fiscal-Related Attachment |
|---|---|--|
| No fiscal-related attachments are required for this grant. | | |
| # | Name of Required Program-Related Attachment | Description of Required Program-Related Attachment |
| No program-related attachments are required for this grant. | | |

Part 2: Acceptance and Compliance

By marking an X in each of the boxes below, the authorized official who signs Schedule #1—General Information certifies his or her acceptance of and compliance with all of the following guidelines, provisions, and assurances.

Note that provisions and assurances specific to this program are listed separately, in Part 3 of this schedule, and require a separate certification.

| X | Acceptance and Compliance |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | I certify my acceptance of and compliance with the <u>General and Fiscal Guidelines</u> . |
| <input checked="" type="checkbox"/> | I certify my acceptance of and compliance with the <u>program guidelines for this grant</u> . |
| <input checked="" type="checkbox"/> | I certify my acceptance of and compliance with all <u>General Provisions and Assurances requirements</u> . |
| <input checked="" type="checkbox"/> | I certify that I am not debarred or suspended. I also certify my acceptance of and compliance with all <u>Debarment and Suspension Certification requirements</u> . |

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Schedule #2—Required Attachments and Provisions and Assurances

County-district number or vendor ID: 001904

Amendment # (for amendments only):

Part 3: Program-Specific Provisions and Assurances I certify my acceptance of and compliance with all program-specific provisions and assurances listed below.

| # | Provision/Assurance |
|----|---|
| 1. | The applicant provides assurance that program funds will supplement (increase the level of service), and not supplant (replace) state mandates, State Board of Education rules, and activities previously conducted with state or local funds. The applicant provides assurance that state or local funds may not be decreased or diverted for other purposes merely because of the availability of these funds. The applicant provides assurance that program services and activities to be funded from this grant will be supplementary to existing services and activities and will not be used for any services or activities required by state law, State Board of Education rules, or local policy. |
| 2. | The applicant provides assurance that the application does not contain any information that would be protected by the Family Educational Rights and Privacy Act (FERPA) from general release to the public. |
| 3. | The applicant provides assurances that they will continue to meet all Statutory Requirements as outlined in their 2017–2018 Perkins Formula Grant incorporated by reference. |
| 4. | The applicant assures that its ability is to meet the 20% match requirement. |
| 5. | Applicants applying for Focus Area 1, 2, or 3 provide assurance that the curriculum they develop will be appropriately aligned to marketable skills in the identified high-demand occupations. It may include industry recognized credentialing as part of the degree plan. |
| 6. | Applicants applying for Focus Area 1, 2, or 3 provide assurance that the development and implementation of industry experiences, including mentorship programs, internships, externships, and/or apprenticeship, will expose students to applied learning and real-world work activities in the identified high-demand occupation(s). |
| 7. | Applicants applying for Focus Area 1, 2, or 3 provide assurance that, within 90 days of the grant start, awarded applicants will submit a Memorandum of Understanding (MOU) detailing the relationship between the dual credit partner, the LEA, and business and industry partner(s). |

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Schedule #4—Request for Amendment

County-district number or vendor ID: 001904

Amendment # (for amendments only):

Part 1: Submitting an Amendment

This schedule is used to amend a grant application that has been approved by TEA and issued a Notice of Grant Award (NOGA). **Do not submit this schedule with the original grant application.** Refer to the instructions to this schedule for information on what schedules must be submitted with an amendment.

An amendment may be submitted by mail *or* by fax. Do not submit the same amendment by both methods. Amendments submitted via email will not be accepted.

If the amendment is mailed, submit three copies of each schedule pertinent to the amendment to the following address: Document Control Center, Grants Administration Division, Texas Education Agency, 1701 N. Congress Ave., Austin, TX 78701-1494.

If the amendment is faxed, submit one copy of each schedule pertinent to the amendment to either of the following fax numbers: (512) 463-9811 or (512) 463-9564.

The last day to submit an amendment to TEA is listed on the [TEA Grant Opportunities](#) page. An amendment is effective on the day TEA receives it in substantially approvable form. All amendments are subject to review and approval by TEA.

Part 2: When an Amendment Is Required

For all grants, regardless of dollar amount, prior written approval is required to make certain changes to the application. Refer to the "When to Amend the Application" guidance posted in the Amendment Submission Guidance section of the Grants Administration Division [Administering a Grant](#) page to determine when an amendment is required for this grant. Use that guidance to complete Part 3 and Part 4 of this schedule.

Part 3: Revised Budget

| | | | A | B | C | D |
|----|-------------------------------------|--------------------------|---|-------------------|-----------------|--------------------|
| # | Schedule # | Class/ Object Code | Grand Total from Previously Approved Budget | Amount Deleted | Amount Added | New Grand Total |
| 1. | Schedule #7: Payroll | 6100 | \$ | \$ | \$ | \$ |
| 2. | Schedule #8: Contracted Services | 6200 | \$ | \$ | \$ | \$ |
| 3. | Schedule #9: Supplies and Materials | 6300 | \$ | \$ | \$ | \$ |
| 4. | Schedule #10: Other Operating Costs | 6400 | \$ | \$ | \$ | \$ |
| 5. | Schedule #11: Capital Outlay | 6600 | \$ | \$ | \$ | \$ |
| 6. | Total costs: | | \$ | \$ | \$ | \$ |

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On this date:

By TEA staff person:

Schedule #4—Request for Amendment(cont.)

County-district number or vendor ID: 001904

Amendment # (for amendments only):

Part 4: Amendment Justification

| Line # | Schedule # Being Amended | Description of Change | Reason for Change |
|--------|--------------------------|-----------------------|-------------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |
| 6. | | | |
| 7. | | | |

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Schedule #5—Program Executive Summary

| | |
|--|------------------------------------|
| County-district number or vendor ID: 001904 | Amendment # (for amendments only): |
| Provide a brief overview of the program you plan to deliver. Refer to the instructions for a description of the requested elements of the summary. Response is limited to space provided, front side only, font size no smaller than 10 point Arial. | |
| Indicate the Focus Area for which you are applying. Only one Focus Area may be selected per application, limit of two applications per LEA (see Program Guidelines pages 8 and 11 for more information on eligibility requirements for each of the Focus Areas). | |
| <input checked="" type="checkbox"/> Focus Area 1: Pathway Hubs, Rural Schools <input type="checkbox"/> Focus Area 2: Pathway Hubs, Career Center Partnerships <input type="checkbox"/> Focus Area 3: CTE Career Cluster <input type="checkbox"/> Focus Area 4: Testing Site/Licensed Instructor | |

Frankston ISD is a small rural school district located in East Texas. Frankston ISD is looking for opportunities to increase the college and career readiness of our students. We are interested in launching and maintaining Advanced Placement (AP), Dual Credit (DC), and Industry Certification course offerings in our CTE programs. These advanced academics would allow our students to access rigorous courses with the potential of earning college credit. When our students are taking these courses, they will be demonstrating to college admission officers that they have sought out an educational experience that will prepare them for success in college and beyond. Frankston ISD seeks to offer industry certifications that ensure our graduates are successful in post-secondary and career endeavors.

This will also allow us to help offer professional development and training for our CTE teachers. Our CTE teachers will attend AP and DC training to help develop their skills in providing the rigor students needs to be successful in college and career choices. Our teachers will work with their students to develop and apply the skills, abilities, and content knowledge they will need later in college and career.

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Schedule #5—Program Executive Summary (cont.)

County-district number or vendor ID: 001904

Amendment # (for amendments only):

Provide a brief overview of the program you plan to deliver. Refer to the instructions for a description of the requested elements of the summary. Response is limited to space provided, front side only, font size no smaller than 10 point Arial.

[Empty response area for program executive summary]

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Schedule #6—Program Budget Summary

| | |
|--|------------------------------------|
| County-district number or vendor ID: 001904 | Amendment # (for amendments only): |
| Program authority: Title I, Carl D. Perkins Career and Technical Education Act of 2006, P. L. 109-270, Sec. 112 (a)(1) | |
| Grant period: November 13, 2017, to August 31, 2018 | Fund code: 244 |

Budget Summary

| Schedule # | Title | Class/ Object Code | Program Cost | Admin Cost | Total Budgeted Cost | Match |
|---|---|--------------------------|-----------------|------------|---------------------------|----------------|
| Schedule #7 | Payroll Costs (6100) | 6100 | \$ | \$ | \$ | \$ |
| Schedule #8 | Professional and Contracted Services (6200) | 6200 | \$2000 | \$ | \$2000 | \$400 |
| Schedule #9 | Supplies and Materials (6300) | 6300 | \$45950 | \$ | \$45950 | \$10000 |
| Schedule #10 | Other Operating Costs(6400) | 6400 | \$1000 | \$ | \$1000 | \$200 |
| Schedule #11 | Capital Outlay (6600) | 6600 | \$ | \$ | \$ | \$ |
| Grand total of budgeted costs (add all entries in each column): | | | \$48950 | \$ | \$48950 | \$10600 |

Administrative Cost Calculation

| | |
|--|------------------|
| Enter the total grant amount requested: | \$48950 |
| Percentage limit on administrative costs established for the program(5%): | × .05 |
| Multiply and round down to the nearest whole dollar. Enter the result. This is the maximum amount allowable for administrative costs, including indirect costs: | \$2447.50 |

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| | |
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|---|---|

| Schedule #7—Payroll Costs (6100) | | | | |
|---|--|---|------------------------------------|-------|
| County-district number or vendor ID: 001904 | | | Amendment # (for amendments only): | |
| Employee Position Title | Estimated # of Positions 100% Grant Funded | Estimated # of Positions <100% Grant Funded | Grant Amount Budgeted | Match |
| Academic/Instructional | | | | |
| 1 | | | | |
| 2 | Educational aide | | \$ | \$ |
| 3 | Tutor | | \$ | \$ |
| Program Management and Administration | | | | |
| 4 | Project director | | \$ | \$ |
| 5 | Project coordinator | | \$ | \$ |
| 6 | Teacher facilitator | | \$ | \$ |
| 7 | Teacher supervisor | | \$ | \$ |
| 8 | Secretary/administrative assistant | | \$ | \$ |
| 9 | Data entry clerk | | \$ | \$ |
| 10 | Grant accountant/bookkeeper | | \$ | \$ |
| 11 | Evaluator/evaluation specialist | | \$ | \$ |
| Auxiliary | | | | |
| 12 | Counselor | | \$ | \$ |
| 13 | Social worker | | \$ | \$ |
| 14 | Community liaison/parent coordinator | | \$ | \$ |
| Education Service Center (to be completed by ESC only when ESC is the applicant) | | | | |
| 15 | | | | |
| 16 | | | | |
| 17 | | | | |
| 18 | | | | |
| 19 | | | | |
| 20 | | | | |
| Other Employee Positions | | | | |
| 21 | Title | | \$ | \$ |
| 22 | Title | | \$ | \$ |
| 23 | Title | | \$ | \$ |
| 24 | Subtotal employee costs: | | \$ | \$ |
| Substitute, Extra-Duty Pay, Benefits Costs | | | | |
| 25 | 6112 | Substitute pay | \$ | \$ |
| 26 | 6119 | Professional staff extra-duty pay | \$ | \$ |
| 27 | 6121 | Support staff extra-duty pay | \$ | \$ |
| 28 | 6140 | Employee benefits | \$ | \$ |
| 29 | 61XX | Tuition remission (IHEs only) | \$ | \$ |
| 30 | Subtotal substitute, extra-duty, benefits costs | | \$ | \$ |
| 31 | Grand total (Subtotal employee costs plus subtotal substitute, extra-duty, benefits costs): | | \$ | \$ |

For budgeting assistance, see the Allowable Cost and Budgeting Guidance section of the Grants Administration Division [Administering a Grant](#) page.

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| Schedule #8—Professional and Contracted Services (6200) | | | |
|--|---|------------------------------------|--------------|
| County-district number or vendor ID: 001904 | | Amendment # (for amendments only): | |
| NOTE: Specifying an individual vendor in a grant application does not meet the applicable requirements for sole-source providers. TEA's approval of such grant applications does not constitute approval of a sole-source provider. | | | |
| Professional and Contracted Services Requiring Specific Approval | | | |
| Expense Item Description | | Grant Amount Budgeted | Match |
| 6269 | Rental or lease of buildings, space in buildings, or land | \$ | \$ |
| | Specify purpose: | | |
| a. Subtotal of professional and contracted services (6200) costs requiring specific approval: | | \$ | \$ |
| Professional and Contracted Services | | | |
| # | Description of Service and Purpose | Grant Amount Budgeted | Match |
| 1 | | \$ | \$ |
| 2 | | \$ | \$ |
| 3 | | \$ | \$ |
| 4 | | \$ | \$ |
| 5 | | \$ | \$ |
| 6 | | \$ | \$ |
| 7 | | \$ | \$ |
| 8 | | \$ | \$ |
| 9 | | \$ | \$ |
| 10 | | \$ | \$ |
| 11 | | \$ | \$ |
| 12 | | \$ | \$ |
| 13 | | \$ | \$ |
| 14 | | \$ | \$ |
| b. Subtotal of professional and contracted services: | | \$ | \$ |
| c. Remaining 6200—Professional and contracted services that do not require specific approval: | | \$2000 | \$400 |
| (Sum of lines a, b, and c) Grand total | | \$2000 | \$400 |

For budgeting assistance, see the Allowable Cost and Budgeting Guidance section of the Grants Administration Division Administering a Grant page.

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| Schedule #9—Supplies and Materials (6300) | | | | |
|---|---|---|------------------------------|----------------|
| County-District Number or Vendor ID: 001904 | | Amendment number (for amendments only): | | |
| Supplies and Materials Requiring Specific Approval | | | | |
| | | | Grant Amount Budgeted | Match |
| 6300 | Total supplies and materials that do not require specific approval: | | \$45950 | \$10000 |
| Grand total: | | | \$45950 | \$10000 |

For budgeting assistance, see the Allowable Cost and Budgeting Guidance section of the Grants Administration Division Administering a Grant page.

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| Schedule #10—Other Operating Costs (6400) | | | |
|---|--|---|--------------|
| County-District Number or Vendor ID: 001904 | | Amendment number (for amendments only): | |
| Expense Item Description | | Grant Amount Budgeted | Match |
| 6413 | Stipends for non-employees other than those included in 6419 | \$ | \$ |
| 6419 | Non-employee costs for conferences. Requires pre-authorization in writing. | \$ | \$ |
| Subtotal other operating costs requiring specific approval: | | \$ | \$ |
| Remaining 6400—Other operating costs that do not require specific approval: | | \$1000 | \$200 |
| Grand total: | | \$1000 | \$200 |

In-state travel for employees does not require specific approval.

For budgeting assistance, see the Allowable Cost and Budgeting Guidance section of the Grants Administration Division Administering a Grant page.

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| Schedule #11—Capital Outlay(6600) | | | | | |
|---|-------------------------|----------|---|-----------------------|-------|
| County-District Number or Vendor ID: 001904 | | | Amendment number (for amendments only): | | |
| # | Description and Purpose | Quantity | Unit Cost | Grant Amount Budgeted | Match |
| 6669—Library Books and Media (capitalized and controlled by library) | | | | | |
| 1 | | N/A | N/A | \$ | \$ |
| 66XX—Computing Devices, capitalized | | | | | |
| 2 | | | \$ | \$ | \$ |
| 3 | | | \$ | \$ | \$ |
| 4 | | | \$ | \$ | \$ |
| 5 | | | \$ | \$ | \$ |
| 6 | | | \$ | \$ | \$ |
| 7 | | | \$ | \$ | \$ |
| 8 | | | \$ | \$ | \$ |
| 9 | | | \$ | \$ | \$ |
| 10 | | | \$ | \$ | \$ |
| 11 | | | \$ | \$ | \$ |
| 66XX—Software, capitalized | | | | | |
| 12 | | | \$ | \$ | \$ |
| 13 | | | \$ | \$ | \$ |
| 14 | | | \$ | \$ | \$ |
| 15 | | | \$ | \$ | \$ |
| 16 | | | \$ | \$ | \$ |
| 17 | | | \$ | \$ | \$ |
| 18 | | | \$ | \$ | \$ |
| 66XX—Equipment, furniture, or vehicles | | | | | |
| 19 | | | \$ | \$ | \$ |
| 20 | | | \$ | \$ | \$ |
| 21 | | | \$ | \$ | \$ |
| 22 | | | \$ | \$ | \$ |
| 23 | | | \$ | \$ | \$ |
| 24 | | | \$ | \$ | \$ |
| 25 | | | \$ | \$ | \$ |
| 26 | | | \$ | \$ | \$ |
| 27 | | | \$ | \$ | \$ |
| 28 | | | \$ | \$ | \$ |
| 66XX—Capital expenditures for additions, improvements, or modifications to capital assets that materially increase their value or useful life (not ordinary repairs and maintenance) | | | | | |
| 29 | | | | \$ | \$ |
| Grand total: | | | | \$ | \$ |

For budgeting assistance, see the Allowable Cost and Budgeting Guidance section of the Grants Administration Division Administering a Grant page.

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| Schedule #12—Demographics and Participants to Be Served with Grant Funds | | | | | | | | | | | | | | |
|--|----------------|--------------------|---------|---|---|---|---|---|---|------------------------------------|----|----|----|-------|
| County-district number or vendor ID: 001904 | | | | | | | | | | Amendment # (for amendments only): | | | | |
| Part 1: Student/Teacher Demographics of Population To Be Served With Grant Funds. Enter the data requested for the population to be served by this grant program. If data is not available, enter DNA. Use the comment section to add a description of any data not specifically requested that is important to understanding the population to be served by this grant program. Response is limited to space provided. Use Arial font, no smaller than 10 point. | | | | | | | | | | | | | | |
| Student Category | Student Number | Student Percentage | Comment | | | | | | | | | | | |
| Economically disadvantaged | 120 | 48% | | | | | | | | | | | | |
| Limited English proficient (LEP) | 4 | 1.6% | | | | | | | | | | | | |
| Attendance rate | NA | 96.2% | | | | | | | | | | | | |
| Annual dropout rate (Gr 9-12) | NA | 2.3% | | | | | | | | | | | | |
| Teacher Category | Teacher Number | Teacher Percentage | Comment | | | | | | | | | | | |
| 1-5 Years Exp. | 1 | 7% | | | | | | | | | | | | |
| 6-10 Years Exp. | 2 | 14% | | | | | | | | | | | | |
| 11-20 Years Exp. | | % | | | | | | | | | | | | |
| 20+ Years Exp. | | % | | | | | | | | | | | | |
| No degree | | % | | | | | | | | | | | | |
| Bachelor's Degree | | % | | | | | | | | | | | | |
| Master's Degree | | % | | | | | | | | | | | | |
| Doctorate | | % | | | | | | | | | | | | |
| Part 2: Students/Teachers To Be Served With Grant Funds. Enter the number of students in each grade, by type of school, projected to be served under the grant program. | | | | | | | | | | | | | | |
| School Type: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Open-Enrollment Charter <input type="checkbox"/> Private Nonprofit <input type="checkbox"/> Private For Profit <input type="checkbox"/> Public Institution | | | | | | | | | | | | | | |
| Students | | | | | | | | | | | | | | |
| PK | K | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | Total |
| | | | | | | | | | | | | 15 | 15 | 30 |
| Teachers | | | | | | | | | | | | | | |
| PK | K | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | Total |
| | | | | | | | | | | | | 2 | 1 | 3 |

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|---|---|
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Schedule #13—Needs Assessment

County-district number or vendor ID: 001904

Amendment # (for amendments only):

Part 1: Process Description. A needs assessment is a systematic process for identifying and prioritizing needs, with “need” defined as the difference between current achievement and desired outcome or required accomplishment. Describe your needs assessment process, including a description of how needs are prioritized. If this application is for a district level grant that will only serve specific campuses, list the name of the campus(es) to be served and why they were selected. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

Our goal at Frankston High School is to produce college and career ready graduates to ensure post-secondary success. By offering Advanced Placement and Dual Credit CTE courses we are preparing our students for success. Frankston ISD needs to offer a variety of industry certifications. The only certification course currently offered is Certified Nurse's Assistant. Frankston High School needs to increase the number of certifications offered to include welding, ranch management, pharmacy technician, and others. These CTE certifications are based on the top 25 occupations listed for East Texas and that also match the interests of our students.

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| Schedule #13—Needs Assessment (cont.) | | |
|---|---|---|
| County-district number or vendor ID: 001904 | | Amendment # (for amendments only): |
| Part 2: Alignment with Grant Goals and Objectives. List your top three to five needs, in rank order of assigned priority. Describe how those needs would be effectively addressed by implementation of this grant program. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. | | |
| # | Identified Need | How Implemented Grant Program Would Address |
| 1. | Increase the number of industry certifications offered. | Allows Frankston High School to offer a variety of industry certifications. |
| 2. | Increase student success in industry certifications. | Increased student participation, readiness, and success in the top 25 occupations in East Texas. |
| 3. | Increase the number of college and career ready students. | AP/DC CTE courses will increase student achievement and college/career readiness. |
| 4. | Improve rigor for CTE students. | Train and prepare Frankston ISD teachers through Professional Development will improve classroom instruction. |
| 5. | Provide opportunities for student achievement and success in college/career readiness | Increased rigor in CTE courses. |

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Schedule #14—Management Plan

County-district number or vendor ID: 001904 Amendment # (for amendments only):

Part 1: Staff Qualifications. List the titles of the primary project personnel and any external consultants projected to be involved in the implementation and delivery of the program, along with desired qualifications, experience, and any requested certifications. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

| # | Title | Desired Qualifications, Experience, Certifications |
|----|-----------------------|--|
| 1. | High School Principal | Certified administrator, experience in AP/DC programs |
| 2. | Counselor | Certified counselor, experience in preparing students for college/career readiness |
| 3. | Teachers | Certified in CTE content offered for student certifications |
| 4. | Central Office Staff | Experience and success in deploying and implementing successful grants |
| 5. | | |

Part 2: Milestones and Timeline. Summarize the major objectives of the planned project, along with defined milestones and projected timelines. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

| # | Objective | Milestone | Begin Activity | End Activity |
|----|--|---|----------------|--------------|
| 1. | Identify industry certifications | 1. Identify/align occupational trends for east Texas region | 12/13/2017 | 06/30/2018 |
| | | 2. Identify courses aligned to certifications | 12/13/2017 | 06/30/2018 |
| | | 3. | XX/XX/XXXX | XX/XX/XXXX |
| | | 4. | XX/XX/XXXX | XX/XX/XXXX |
| | | 5. | XX/XX/XXXX | XX/XX/XXXX |
| 2. | Identify/train CTE teachers | 1. Identify CTE teachers | 12/13/2017 | 06/30/2018 |
| | | 2. Verify/provide industry certifications for teachers | 06/30/2018 | 08/31/2018 |
| | | 3. Provide professional development (ongoing) | 06/30/2018 | 08/31/2018 |
| | | 4. | XX/XX/XXXX | XX/XX/XXXX |
| | | 5. | XX/XX/XXXX | XX/XX/XXXX |
| 3. | Identify CTE students | 1. Open enrollment for industry certification CTE classes | 12/13/2017 | 08/31/2018 |
| | | 2. Identify student aptitude for success | 12/13/2017 | 08/31/2018 |
| | | 3. | XX/XX/XXXX | XX/XX/XXXX |
| | | 4. | XX/XX/XXXX | XX/XX/XXXX |
| | | 5. | XX/XX/XXXX | XX/XX/XXXX |
| 4. | Begin industry certification CTE classes | 1. Begin courses | 08/20/2018 | 08/31/2018 |
| | | 2. | XX/XX/XXXX | XX/XX/XXXX |
| | | 3. | XX/XX/XXXX | XX/XX/XXXX |
| | | 4. | XX/XX/XXXX | XX/XX/XXXX |
| | | 5. | XX/XX/XXXX | XX/XX/XXXX |
| 5. | Evaluate program | 1. Ongoing evaluation | 12/13/2017 | 08/31/2018 |
| | | 2. | XX/XX/XXXX | XX/XX/XXXX |
| | | 3. | XX/XX/XXXX | XX/XX/XXXX |
| | | 4. | XX/XX/XXXX | XX/XX/XXXX |
| | | 5. | XX/XX/XXXX | XX/XX/XXXX |

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Unless pre-award costs are specifically approved by TEA, grant funds will be used to pay only for activities occurring between the beginning and ending dates of the grant, as specified on the Notice of Grant Award.

Schedule #14—Management Plan (cont.)

| | |
|---|------------------------------------|
| County-district number or vendor ID: 001904 | Amendment # (for amendments only): |
|---|------------------------------------|

Part 3: Feedback and Continuous Improvement. Describe the process and procedures your organization currently has in place for monitoring the attainment of goals and objectives. Include a description of how the plan for attaining goals and objectives is adjusted when necessary and how changes are communicated to administrative staff, teachers, students, parents, and members of the community. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

Frankston ISD continually evaluates and adjusts in maintaining our goals and objectives. Administrative staff meet weekly and monthly to communicate progress and evaluations of ongoing initiatives. Campus administrators meet weekly and monthly with teachers to evaluate campus and course goals. Our counseling staff reaches out to students and parents in communication with all students. Teachers have to responsibility of contacting all parents to express student achievement for all students. The high school reaches out to parents of both struggling and high achieving student. Both the campus and central office have teams that include parents, teachers, and community members to continue to maintain a positive culture and climate.

Part 4: Sustainability and Commitment. Describe any ongoing, existing efforts that are similar or related to the planned project. How will you coordinate efforts to maximize effectiveness of grant funds? How will you ensure that all project participants remain committed to the project's success? Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

Frankston ISD is creating new CTE Industry certification programs. Continuous monitoring and adjustments will be made through the grant period and beyond. This grant is helping to create the base of successful certification programs. The high school will form a committee of teachers, students, and administrators to evaluation and improve the program to be successful beyond the scope of this grant.

By offering AP/DC CTE certification courses, our students, parents, and community will better understand the benefits of the courses and increase our students' academic skill set. In order to experience success, we will have to create a school schedule that provides additional learning opportunities for our students.

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| Schedule #15—Project Evaluation | | |
|--|---|---|
| County-district number or vendor ID: 001904 | | Amendment # (for amendments only): |
| Part 1: Evaluation Design. List the methods and processes you will use on an ongoing basis to examine the effectiveness of project strategies, including the indicators of program accomplishment that are associated with each. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. | | |
| # | Evaluation Method/Process | Associated Indicator of Accomplishment |
| 1. | Report on teacher professional development | 1. Teachers will report on professional development with administrators |
| | | 2. High School campus will monitor and adjust professional development |
| | | 3. |
| 2. | Campus will disaggregate student progress on AP/DC CTE benchmarks | 1. Benchmarks |
| | | 2. Industry certifications practice tests |
| | | 3. |
| 3. | Successful completion of AT/DC CTE courses | 1. Grades |
| | | 2. College credit |
| | | 3. |
| 4. | Successful completion of Industry Certifications | 1. Industry certifications awarded |
| | | 2. Enrollment in post-secondary programs |
| | | 3. |
| 5. | | 1. |
| | | 2. |
| | | 3. |
| Part 2: Data Collection and Problem Correction. Describe the processes for collecting data that are included in the evaluation design, including program-level data such as program activities and the number of participants served, and student-level academic data, including achievement results and attendance data. How are problems with project delivery to be identified and corrected throughout the project? Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. | | |
| Each semester will consist of a final exam given on the skills that will allow the student to demonstrate mastery of the course with a course grade of 90% or higher. | | |
| Frankston High School will collect data through daily attendance and benchmark test scores to evaluate and modify as needed. We will use industry certification practice tests available through the identified industry guidelines. This will allow us to identify and analyze our students. | | |
| FHS teachers will participate in professional development to better understand the content and skills assessed on the industry certification tests. Afterwards, teachers will use resources to embed these skills within their content lesson plans until the students test. After we receive the data, our teachers will collaborate in another professional development session to analyze and discuss results in order to create lesson plans that target readiness standards they did not master. We will provide another skill benchmark test in semester 2 to assess their progress and adjust our instruction according to our needs. After school is dismissed, our teachers will attend content and skill specific professional development to improve their knowledge and apply new learned material in their lessons. | | |

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| Schedule #17—Responses to TEA Program Requirements | |
|--|------------------------------------|
| County-district number or vendor ID: 001904 | Amendment # (for amendments only): |
| TEA Program Requirement 1: Explain how the project identified the high-demand occupations and their related programs of study in partnership with the local workforce development board. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. | |
| Applicants applying for Focus Areas 1, 2, or 3 must address this question. | |
| <p>By offering AP/DC CTE certification courses, our students, parents, and community will better understand the benefits of the courses and increase our students' skill set. In order to experience success, we will have to create a school schedule that provides additional learning opportunities for our students. Also, our teachers will need professional development and resources to provide engaging lessons that allow students opportunities to demonstrate learning through various outcomes. Learning opportunities will be created outside the classroom as well to allow the students full exposure to the content through local workforce development board, business and higher education partnerships. Throughout the learning process, our students will be exposed to various assessments that will provide valuable data our team will use to shape our instructional practice and create interventions when needed.</p> <p>Our local workforce development board is East Texas Workforce Solutions. Our partnership with ETWS and their identification of high demand occupations, will allow us to focus on job skills and certifications needed in the East Texas region.</p> | |

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| Schedule #17—Responses to TEA Program Requirements | |
|---|------------------------------------|
| County-district number or vendor ID: 001904 | Amendment # (for amendments only): |
| TEA Program Requirement 2: Describe how you will design at least one program of study that spans secondary and postsecondary education and includes an appropriate sequence of courses that are aligned with high-demand occupations identified by local regional workforce board. The program of study should build in rigor as students progress through high school. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. | |
| Applicants applying for Focus Areas 1, 2, or 3 must address this question. | |
| Frankston ISD will design at least one program of study that spans secondary and postsecondary education. Welders, Cutters, Solderers, and Brazers are ranked 7 th on the top 25 occupations listed in the East Texas region occupation trends. The welding technology pathway of Principles of Agriculture, Ag Mechanics & Metal Fabrication, Welding Technology, and Advanced Welding Technology provides a strong foundation for postsecondary success. Frankston ISD offers a strong foundation for success through its agriculture program with a 5 year old 10,000 square foot Ag Mechanics facility. Current equipment includes a new CNC plasma cutter system. With the opportunity offered by this grant, Frankston will continue to move forward and add rigor as students prepare for their future. | |

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Schedule #17—Responses to TEA Program Requirements

County-district number or vendor ID: 001904

Amendment # (for amendments only):

TEA Program Requirement 3: Provide a sample crosswalk that identifies postsecondary coursework that would be required of a student in the program of study in order to complete a certificate or receive an associate’s degree from the partnering general academic teaching institution(s) within two to three years of graduating from high school. The crosswalk may also demonstrate how the project can lead to a bachelor’s degree. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

Applicants applying for Focus Areas 1, 2, or 3 must address this question.

Articulation for cross-walking with Trinity Valley Community College (TVCC) and Texas State Technical College (TSTC) college credit courses with high school credit for dual credit will be developed. This cross-walk is derived from current practices within TVCC, TSTC and service-area ISD’s, as well as other community colleges. Suggested cross-walks are mandated. Frankston ISD chooses to award high school credit in a dual credit arrangement with approved community and technical colleges. This cross-walk includes the suggested high school course, the TVCC or TSTC course, the TSI Requirements, and whether the course has Pre-requisite requirements for enrollment. These prerequisites and TSI Requirements are subject to change as State Laws and College Policies Change. Our current academic catalog has the updated information.

TVCC and TSTC along with Frankston ISD can agree to establish articulation agreements. The purpose of the program is to provide support, guidance, a strong foundation in job-related technical and academic education to students. These institutions believe that by planning and working together they can encourage more students to earn a post-secondary degree. This planning arrangement can also serve as an aid to minimize teaching redundancy as well as minimize the need for remediation at the college level. This agreement provides a mechanism that enables awarding college credit through articulation upon completion of specific courses and/or programs at the high school level, thereby permitting students to reduce the time and cost of earning a college degree. The Advanced Technical Credit (ATC) Program gives high school students a chance to receive credit at participating community colleges across Texas for taking certain enhanced technical courses during high school. The statewide articulated courses and their equivalent college courses are listed in the ATC Course Crosswalk. All the participating community colleges student meets certain criteria. For a high school to offer an ATC course to its students, the teacher of the course must meet the ATC teacher requirements, go through ATC training have agreed to offer students credit for these courses, provided the college offers the course and the and teach the high school course so that it is enhanced to meet the content of the equivalent college course. ATC courses are only offered in technical or workforce areas - courses in academic areas such as English or history are not offered as ATC courses.

The certifications testing offered will follow guidelines from American Welding Society (AWS) and the National Center for Construction Education and Research (NCCER). Certified Welders are projected to be in demand for the next several years and Frankston ISD certification program will provide it’s students with the skill to be successful in the demand field.

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Schedule #17—Responses to TEA Program Requirements (cont.)

County-district number or vendor ID: 001904

Amendment # (for amendments only):

TEA Program Requirement 4: Identify the partner organizations that will help carry out the grant. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. **Applicants applying for Focus Areas 1, 2, or 3 must address this question.**

Frankston ISD will partner with area community and technical colleges including TVCC and TSTC. These partnerships will allow Frankston students the opportunity to successfully complete industry standard certifications. Along with the completion of certifications, students will receive college credit.

TEA Program Requirement 5: Identify at least one industry partner that will assist with curriculum development to support relevant and frequent industry experiences for students participating in the program. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. **Applicants applying for Focus Areas 1, 2, or 3 must address this question.**

Frankston ISD will use the guidance of area technical and college curriculum in conjunction with the CTE course TEKS. Frankston will also work with industry organizations such as the Tyler Area Builders Association. Frankston ISD will identify other industry partners to ensure the success and sustainability of the program. With the help of this grant Frankston ISD will build the foundation of a successful AP/DC CTE certification program.

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| Schedule #17—Responses to TEA Program Requirements | |
|---|------------------------------------|
| County-district number or vendor ID: 001904 | Amendment # (for amendments only): |
| TEA Program Requirement 6: Propose a sustainability plan to ensure that the school(s) will continue to meet the goals of the grant program after the end of the grant program. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. | |
| Applicants applying for Focus Areas 1, 2, or 3 must address this question. | |
| <p>Frankston believes that all students can be successful. By offering AP/DC CTE industry certification courses, our students, parents, and community will better understand the benefits of the courses and increase our students' skill set. In order to experience success, we will have to create a school schedule that provides additional learning opportunities for our students. Also, our teachers will need professional development and resources to provide engaging lessons that allow students opportunities to demonstrate learning through various outcomes. Learning opportunities will be created outside the classroom as well to allow the students full exposure to the content through business and higher education partnerships. Throughout the learning process, our students will be exposed to various assessments that will provide valuable data our team will use to shape our instructional practice and create interventions when needed.</p> <p>We will continue to support and grow this CTE program. AP/DC CTE industry certification programs include a form of advanced academics that would allow our students to access rigorous courses with the potential of earning college credit through performance on AP/DC exams. When our students are taking these courses, they will be demonstrating to college admission officers that they have sought out an educational experience that will prepare them for success in college and beyond.</p> <p>Our campus will create systems and processes we can replicate and limit the use of consumables. The bulk of the resources will be used to create lessons teachers can implement to all students. The resources will include software and books to easily implement, assess, and adjust throughout the year.</p> | |

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Schedule #17—Responses to TEA Program Requirements

County-district number or vendor ID: 001904

Amendment # (for amendments only):

TEA Program Requirement 7: List capstone industry certifications and programs of study that were identified in partnership with postsecondary, industry, or other LEAs. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

Applicants applying for Focus Area 4 must address this question.

N/A

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Schedule #17—Responses to TEA Program Requirements

County-district number or vendor ID: 001904

Amendment # (for amendments only):

TEA Program Requirement 8: Explain how the awarding of a Perkins Reserve Grant will complement the existing CTE program. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

Applicants applying for Focus Area 4 must address this question.

N/A

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| Schedule #18—Equitable Access and Participation | | | | |
|---|---|-------------------------------------|---|-------------------------------------|
| County-District Number or Vendor ID: 001904 | | | Amendment number (for amendments only): | |
| No Barriers | | | | |
| # | No Barriers | Students | Teachers | Others |
| 000 | The applicant assures that no barriers exist to equitable access and participation for any groups | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Barrier: Gender-Specific Bias | | | | |
| # | Strategies for Gender-Specific Bias | Students | Teachers | Others |
| A01 | Expand opportunities for historically underrepresented groups to fully participate | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A02 | Provide staff development on eliminating gender bias | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A03 | Ensure strategies and materials used with students do not promote gender bias | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A04 | Develop and implement a plan to eliminate existing discrimination and the effects of past discrimination on the basis of gender | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A05 | Ensure compliance with the requirements in Title IX of the Education Amendments of 1972, which prohibits discrimination on the basis of gender | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A06 | Ensure students and parents are fully informed of their rights and responsibilities with regard to participation in the program | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A99 | Other (specify) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Barrier: Cultural, Linguistic, or Economic Diversity | | | | |
| # | Strategies for Cultural, Linguistic, or Economic Diversity | Students | Teachers | Others |
| B01 | Provide program information/materials in home language | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B02 | Provide interpreter/translator at program activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B03 | Increase awareness and appreciation of cultural and linguistic diversity through a variety of activities, publications, etc. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B04 | Communicate to students, teachers, and other program beneficiaries an appreciation of students' and families' linguistic and cultural backgrounds | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B05 | Develop/maintain community involvement/participation in program activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B06 | Provide staff development on effective teaching strategies for diverse populations | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B07 | Ensure staff development is sensitive to cultural and linguistic differences and communicates an appreciation for diversity | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B08 | Seek technical assistance from education service center, technical assistance center, Title I, Part A school support team, or other provider | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B09 | Provide parenting training | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B10 | Provide a parent/family center | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B11 | Involve parents from a variety of backgrounds in decision making | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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| Schedule #18—Equitable Access and Participation(cont.) | | | | |
|--|--|--------------------------|---|--------------------------|
| County-District Number or Vendor ID: 001904 | | | Amendment number (for amendments only): | |
| Barrier: Cultural, Linguistic, or Economic Diversity (cont.) | | | | |
| # | Strategies for Cultural, Linguistic, or Economic Diversity | Students | Teachers | Others |
| B12 | Offer "flexible" opportunities for parent involvement including home learning activities and other activities that don't require parents to come to the school | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B13 | Provide child care for parents participating in school activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B14 | Acknowledge and include family members' diverse skills, talents, and knowledge in school activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B15 | Provide adult education, including high school equivalency (HSE) and/or ESL classes, or family literacy program | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B16 | Offer computer literacy courses for parents and other program beneficiaries | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B17 | Conduct an outreach program for traditionally "hard to reach" parents | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B18 | Coordinate with community centers/programs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B19 | Seek collaboration/assistance from business, industry, or institutions of higher education | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B20 | Develop and implement a plan to eliminate existing discrimination and the effects of past discrimination on the basis of race, national origin, and color | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B21 | Ensure compliance with the requirements in Title VI of the Civil Rights Act of 1964, which prohibits discrimination on the basis of race, national origin, and color | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B22 | Ensure students, teachers, and other program beneficiaries are informed of their rights and responsibilities with regard to participation in the program | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B23 | Provide mediation training on a regular basis to assist in resolving disputes and complaints | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B99 | Other (specify) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Barrier: Gang-Related Activities | | | | |
| # | Strategies for Gang-Related Activities | Students | Teachers | Others |
| C01 | Provide early intervention | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C02 | Provide counseling | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C03 | Conduct home visits by staff | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C04 | Provide flexibility in scheduling activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C05 | Recruit volunteers to assist in promoting gang-free communities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C06 | Provide mentor program | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C07 | Provide before/after school recreational, instructional, cultural, or artistic programs/activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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| Schedule #18—Equitable Access and Participation(cont.) | | | | |
|--|--|--------------------------|---|--------------------------|
| County-District Number or Vendor ID: 001904 | | | Amendment number (for amendments only): | |
| Barrier: Gang-Related Activities (cont.) | | | | |
| # | Strategies for Gang-Related Activities | Students | Teachers | Others |
| C08 | Provide community service programs/activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C09 | Conduct parent/teacher conferences | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C10 | Strengthen school/parent compacts | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C11 | Establish collaborations with law enforcement agencies | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C12 | Provide conflict resolution/peer mediation strategies/programs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C13 | Seek collaboration/assistance from business, industry, or institutions of higher education | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C14 | Provide training/information to teachers, school staff, and parents to deal with gang-related issues | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C99 | Other (specify) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Barrier: Drug-Related Activities | | | | |
| # | Strategies for Drug-Related Activities | Students | Teachers | Others |
| D01 | Provide early identification/intervention | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D02 | Provide counseling | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D03 | Conduct home visits by staff | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D04 | Recruit volunteers to assist in promoting drug-free schools and communities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D05 | Provide mentor program | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D06 | Provide before/after school recreational, instructional, cultural, or artistic programs/activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D07 | Provide community service programs/activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D08 | Provide comprehensive health education programs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D09 | Conduct parent/teacher conferences | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D10 | Establish school/parent compacts | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D11 | Develop/maintain community collaborations | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D12 | Provide conflict resolution/peer mediation strategies/programs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D13 | Seek collaboration/assistance from business, industry, or institutions of higher education | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D14 | Provide training/information to teachers, school staff, and parents to deal with drug-related issues | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D99 | Other (specify) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Barrier: Visual Impairments | | | | |
| # | Strategies for Visual Impairments | Students | Teachers | Others |
| E01 | Provide early identification and intervention | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E02 | Provide program materials/information in Braille | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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| Schedule #18—Equitable Access and Participation(cont.) | | | | |
|--|--|--------------------------|---|--------------------------|
| County-District Number or Vendor ID: 001904 | | | Amendment number (for amendments only): | |
| Barrier: Visual Impairments | | | | |
| # | Strategies for Visual Impairments | Students | Teachers | Others |
| E03 | Provide program materials/information in large type | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E04 | Provide program materials/information in digital/audio formats | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E05 | Provide staff development on effective teaching strategies for visual impairment | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E06 | Provide training for parents | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E07 | Format materials/information published on the internet for ADA accessibility | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E99 | Other (specify) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Barrier: Hearing Impairments | | | | |
| # | Strategies for Hearing Impairments | Students | Teachers | Others |
| F01 | Provide early identification and intervention | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| F02 | Provide interpreters at program activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| F03 | Provide captioned video material | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| F04 | Provide program materials and information in visual format | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| F05 | Use communication technology, such as TDD/relay | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| F06 | Provide staff development on effective teaching strategies for hearing impairment | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| F07 | Provide training for parents | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| F99 | Other (specify) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Barrier: Learning Disabilities | | | | |
| # | Strategies for Learning Disabilities | Students | Teachers | Others |
| G01 | Provide early identification and intervention | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| G02 | Expand tutorial/mentor programs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| G03 | Provide staff development in identification practices and effective teaching strategies | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| G04 | Provide training for parents in early identification and intervention | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| G99 | Other (specify) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Barrier: Other Physical Disabilities or Constraints | | | | |
| # | Strategies for Other Physical Disabilities or Constraints | Students | Teachers | Others |
| H01 | Develop and implement a plan to achieve full participation by students with other physical disabilities or constraints | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| H02 | Provide staff development on effective teaching strategies | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| H03 | Provide training for parents | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| H99 | Other (specify) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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Schedule #18—Equitable Access and Participation(cont.)

County-District Number or Vendor ID: 001904

Amendment number (for amendments only):

Barrier: Inaccessible Physical Structures

| # | Strategies for Inaccessible Physical Structures | Students | Teachers | Others |
|-----|---|--------------------------|--------------------------|--------------------------|
| J01 | Develop and implement a plan to achieve full participation by students with other physical disabilities/constraints | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| J02 | Ensure all physical structures are accessible | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| J99 | Other (specify) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Barrier: Absenteeism/Truancy

| # | Strategies for Absenteeism/Truancy | Students | Teachers | Others |
|-----|--|--------------------------|--------------------------|--------------------------|
| K01 | Provide early identification/intervention | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| K02 | Develop and implement a truancy intervention plan | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| K03 | Conduct home visits by staff | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| K04 | Recruit volunteers to assist in promoting school attendance | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| K05 | Provide mentor program | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| K06 | Provide before/after school recreational or educational activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| K07 | Conduct parent/teacher conferences | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| K08 | Strengthen school/parent compacts | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| K09 | Develop/maintain community collaborations | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| K10 | Coordinate with health and social services agencies | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| K11 | Coordinate with the juvenile justice system | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| K12 | Seek collaboration/assistance from business, industry, or institutions of higher education | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| K99 | Other (specify) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Barrier: High Mobility Rates

| # | Strategies for High Mobility Rates | Students | Teachers | Others |
|-----|---|--------------------------|--------------------------|--------------------------|
| L01 | Coordinate with social services agencies | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| L02 | Establish collaborations with parents of highly mobile families | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| L03 | Establish/maintain timely record transfer system | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| L99 | Other (specify) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Barrier: Lack of Support from Parents

| # | Strategies for Lack of Support from Parents | Students | Teachers | Others |
|-----|---|--------------------------|--------------------------|--------------------------|
| M01 | Develop and implement a plan to increase support from parents | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| M02 | Conduct home visits by staff | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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| County-District Number or Vendor ID: 001904 | | | Amendment number (for amendments only): | |
| Barrier: Lack of Support from Parents (cont.) | | | | |
| # | Strategies for Lack of Support from Parents | Students | Teachers | Others |
| M03 | Recruit volunteers to actively participate in school activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| M04 | Conduct parent/teacher conferences | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| M05 | Establish school/parent compacts | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| M06 | Provide parenting training | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| M07 | Provide a parent/family center | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| M08 | Provide program materials/information in home language | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| M09 | Involve parents from a variety of backgrounds in school decision making | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| M10 | Offer "flexible" opportunities for involvement, including home learning activities and other activities that don't require coming to school | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| M11 | Provide child care for parents participating in school activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| M12 | Acknowledge and include family members' diverse skills, talents, and knowledge in school activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| M13 | Provide adult education, including HSE and/or ESL classes, or family literacy program | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| M14 | Conduct an outreach program for traditionally "hard to reach" parents | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| M15 | Facilitate school health advisory councils four times a year | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| M99 | Other (specify) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Barrier: Shortage of Qualified Personnel | | | | |
| # | Strategies for Shortage of Qualified Personnel | Students | Teachers | Others |
| N01 | Develop and implement a plan to recruit and retain qualified personnel | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| N02 | Recruit and retain personnel from a variety of racial, ethnic, and language minority groups | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| N03 | Provide mentor program for new personnel | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| N04 | Provide intern program for new personnel | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| N05 | Provide an induction program for new personnel | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| N06 | Provide professional development in a variety of formats for personnel | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| N07 | Collaborate with colleges/universities with teacher preparation programs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| N99 | Other (specify) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Barrier: Lack of Knowledge Regarding Program Benefits | | | | |
| # | Strategies for Lack of Knowledge Regarding Program Benefits | Students | Teachers | Others |
| P01 | Develop and implement a plan to inform program beneficiaries of program activities and benefits | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| P02 | Publish newsletter/brochures to inform program beneficiaries of activities and benefits | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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| County-District Number or Vendor ID: 001904 | | | Amendment number (for amendments only): | |
| Barrier: Lack of Knowledge Regarding Program Benefits (cont.) | | | | |
| # | Strategies for Lack of Knowledge Regarding Program Benefits | Students | Teachers | Others |
| P03 | Provide announcements to local radio stations, newspapers, and appropriate electronic media about program activities/benefits | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| P99 | Other (specify) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Barrier: Lack of Transportation to Program Activities | | | | |
| # | Strategies for Lack of Transportation | Students | Teachers | Others |
| Q01 | Provide transportation for parents and other program beneficiaries to activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Q02 | Offer "flexible" opportunities for involvement, including home learning activities and other activities that don't require coming to school | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Q03 | Conduct program activities in community centers and other neighborhood locations | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Q99 | Other (specify) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Barrier: Other Barriers | | | | |
| # | Strategies for Other Barriers | Students | Teachers | Others |
| Z99 | Other barrier | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Other strategy | | | |
| Z99 | Other barrier | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Other strategy | | | |
| Z99 | Other barrier | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Other strategy | | | |
| Z99 | Other barrier | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Other strategy | | | |
| Z99 | Other barrier | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Other strategy | | | |
| Z99 | Other barrier | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Other strategy | | | |
| Z99 | Other barrier | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Other strategy | | | |
| Z99 | Other barrier | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Other strategy | | | |
| Z99 | Other barrier | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Other strategy | | | |
| Z99 | Other barrier | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | Other strategy | | | |

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